

Third Party Pharmacy Prescription Administrative Charge

- CY 2016 Average Administrative Cost for Prescriptions (<http://www.va.gov/CBO/payerinfo/avgadmincostrxcy16.asp>)
- CY 2015 Average Administrative Cost for Prescriptions (<http://www.va.gov/CBO/payerinfo/avgadmincostrxcy15.asp>)
- CY 2014 Average Administrative Cost for Prescriptions (<http://www.va.gov/CBO/payerinfo/avgadmincostrxcy14.asp>)

Cost-Based and Interagency Rates

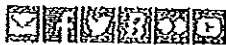
- Cost Based Interagency Federal Register Notice, 07/07/16 (PDF) (<https://www.gpo.gov/fdsys/pkg/FR-2016-07-07/pdf/2016-15956.pdf>)
- Cost Based Interagency Federal Register Notice, 11/04/14 (PDF) (<http://www.gpo.gov/fdsys/pkg/FR-2014-11-04/pdf/2014-26148.pdf>)
- Cost Based Interagency Federal Register Notice, 07/11/11 (PDF) (<http://www.gpo.gov/fdsys/pkg/FR-2011-07-11/pdf/2011-17263.pdf>)

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RESOURCES

ADMINISTRATION

TABLE F. — OUTPATIENT FACILITY NATIONWIDE CHARGES BY CPT/HCPCS CODE

PAGE 71 of 169

CPT/ HCPCS Code	Description	Status/ Usage Indicator ¹	Multiple Surgery Reduction Applies	Charge	Charge Methodology ²
63650	PRQ IMPLTJ NSTIM ELECTRODE ARRAY EPIDURAL			\$21,925.21	APC
63655	LAM IMPLTJ NSTIM ELTROS PLATE/PADDLE EDRL			\$34,559.16	APC
63661	RMVL SPINAL NSTIM ELTRO PRQ ARRAY INCL FLUOR			\$8,377.18	APC
63662	RMVL SPINAL NSTIM ELTRO PLATE/PADDLE INCL FLUOR			\$12,149.27	APC
63663	REVJ INCL RPLCMT NSTIM ELTRO PRQ RA INCL FLUOR			\$21,925.21	APC
63664	REVJ INCL RPLCMT NSTIM ELTRO PLT/PDLE INCL FLUOR			\$21,925.21	APC
63685	INSJ/RPLCMT SPI NPGR DIR/INDUXIVE COUPLING			\$53,493.40	APC
63686	REVJ/RMVL IMPLANTED SPINAL NEUROSTIM GENERATOR			\$12,149.27	APC
63741	CRTJ SHUNT LMBR SARACH-PRTL-PLEURAL PRQ X LAM			\$17,171.61	APC
63744	RPLCMT IRRIGATION/REVJ LUMBOSARACH SHUNT			\$17,171.61	APC
63746	RMVL ENTIRE LUMBOSARACH SHUNT SYS W/O RPLCMT			\$8,377.18	APC
64400	NJX ANES TRIGEMINAL NRV ANY DIV/BRANCH			\$1,023.16	APC
64402	INJECTION ANESTHETIC AGENT FACIAL NERVE			\$426.53	APC
64405	INJECTION ANESTHETIC AGENT GREATER OCCIPITAL NRV			\$1,767.91	Other
64408	INJECTION ANESTHETIC AGENT VAGUS NERVE			\$1,023.16	APC
64410	INJECTION ANESTHETIC AGENT PHRENIC NERVE			\$3,655.73	APC
64413	INJECTION ANESTHETIC AGENT CERVICAL PLEXUS			\$3,768.87	APC
64415	SINGLE NERVE BLOCK INJECTION ARM NERVE			\$5,048.03	APC
64416	INJECTION ANES BRACHIAL PLEXUS CONT NPS CATH			\$5,395.03	APC
64417	INJECTION ANESTHETIC AGENT AXILLARY NERVE			\$3,768.87	APC
64418	INJECTION ANESTHETIC AGENT SUPRASCAPULAR NERVE			\$3,768.87	APC
64420	INJECTION ANESTHETIC AGENT 1 INTERCOSTAL NERVE			\$3,768.87	APC
64421	MULTIPLE NERVE BLOCK INJECTIONS RIB NERVES			\$3,768.87	APC
64425	INJECTION ANES ILLIOINGUINAL ILLIOHYPOGASTRIC NRVS			\$3,768.87	APC
64430	INJECTION ANESTHETIC AGENT PUDENDAL NERVE			\$3,768.87	APC
64435	INJECTION ANESTHETIC PARACERVICAL UTERINE NERVE			\$3,768.87	APC
64446	INJECTION ANESTHETIC AGENT SCIATIC NRV SINGLE			\$3,768.87	APC
64446	INJECTION ANES SCIATIC NERVE CONT INFUSION CATH			\$5,395.03	APC
64447	INJECTION ANESTHETIC AGENT FEMORAL NERVE SINGLE			\$3,768.87	APC
64448	INJECTION ANES FEMORAL NERVE CONT INFUSION CATH			\$5,395.03	APC
64449	INJECTION ANES LUMBAR PLEXUS POST CONT NPS CATH			\$5,395.03	APC
64450	INJECTION ANES OTHER PERIPHERAL NERVE/BRANCH			\$1,767.91	Other
64455	NJX ANES&STEROID PLANTAR COMMON DIGITAL NERVE			\$1,023.16	APC
64461	PVB THORACIC SINGLE INJECTION SITE W/MG OID			\$3,655.73	APC
64463	PVB THORACIC CONT CATHETER INFUSION W/MG OID			\$3,655.73	APC
64479	NJX ANES&STRD W/MG TFRML EDRL CRV/THRC 1 LVL			\$3,768.87	APC
64480	NJX ANES&STRD W/MG TFRML EDRL CRV/THRC EA LV			\$4,253.44	FAIR Health
64483	NJX ANES&STRD W/MG TFRML EDRL LMBR/SAC 1 LVL			\$3,768.87	APC
64484	NJX ANES&STRD W/MG TFRML EDRL LMBR/SAC EA LV			\$4,253.44	FAIR Health
64486	TAP BLOCK UNILATERAL BY INJECTION(S)			\$2,030.05	FAIR Health
64487	TAP BLOCK UNILATERAL BY CONTINUOUS INFUSION(S)			\$2,030.05	FAIR Health
64488	TAP BLOCK BILATERAL BY INJECTION(S)			\$2,030.05	FAIR Health
64489	TAP BLOCK BILATERAL BY CONTINUOUS INFUSION(S)			\$2,030.05	FAIR Health
64490	NJX DX/THER AGT PVRT FACET JT CRV/THRC 1 LEVEL			\$5,395.03	APC
64491	NJX DX/THER AGT PVRT FACET JT CRV/THRC 2ND LEVEL			\$3,824.51	Other
64492	NJX DX/THER AGT PVRT FACET JT CRV/THRC 3+ LEVEL			\$3,824.51	Other
64493	NJX DX/THER AGT PVRT FACET JT LMBR/SAC 1 LEVEL			\$5,395.03	APC
64494	NJX DX/THER AGT PVRT FACET JT LMBR/SAC 2ND LEVEL			\$3,824.51	Other
64495	NJX DX/THER AGT PVRT FACET JT LMBR/SAC 3+ LEVEL			\$3,824.51	Other
64505	INJECTION ANES AGENT SPHENOPALATINE GANGLION			\$1,023.16	APC

NOTE: CPT Codes and descriptions only are copyright 2015 American Medical Association. All rights reserved. Applicable FARS/DFARS apply.
 1, 2 - See end of the table for notes regarding these fields.

TABLE F. — OUTPATIENT FACILITY NATIONWIDE CHARGES BY CPT/HCPCS CODE

PAGE 169 of 169

CPT/ HCPCS Code	Description	Status/ Usage Indicator ¹	Multiple Surgery Reduction Applies	Charge	Charge Methodology ²
S9542	HT INJ NOC PER DIEM	0		\$48.29	Other
S9560	HT INJ HORMONE DIEM	0		\$95.87	Other
S9562	HT INJ PALIVIZUMAB DIEM	0		\$95.87	Other
S9590	HT IRRIGATION DIEM	0		\$137.30	Other
V6008	HEARING SCREENING	0		\$237.60	MarketScan
V6010	ASSESSMENT FOR HEARING AID	0		\$354.41	MarketScan

¹ Key to Status/Usage Indicator:

- a: Cannot be billed by VA non-provider-based clinics, because the charge is included in the associated professional charge.
- b: Cannot be billed by VA non-provider-based clinics, because a technical component charge from the professional charge table applies.
- c: Can be billed by VA non-provider-based clinics.
- d: Cannot be billed by VA non-provider-based clinics, because a different code is used for professional billing.
- e: Cannot be billed by VA non-provider-based clinics, because a stand-alone charge from the professional charge table applies.
- f: Can be billed for patients who are subsequently admitted to the hospital.

² Charge Methodology:

5% Sample: Charge developed from Medicare 5% Sample Outpatient database.
 APC: Charge developed from Medicare 5% Sample Outpatient database using APC Methodology
 MarketScan: Charge developed from MarketScan database.
 FAIR Health: Charge developed from FAIR Health's Medical Data Research database.
 Other: Charge from DME or Physician tables or other techniques including crosswalks.
 Trended v3.16: v3.16 charge trended forward to 2016.



Medicare Fee-For Service
Provider Utilization & Payment Data
Inpatient
Public Use File:
A Methodological Overview

June 14, 2016

Prepared by:
The Centers for Medicare and Medicaid Services,
Office of Enterprise Data and Analytics



Table of Contents

1. Background	3
2. Key data sources	3
3. Population.....	3
4. Classification and Summarization	4
5. Data Contents	4
Detailed Data File.....	4
Summary Tables.....	5
6. Data Limitations:	5
7. Updates:.....	6

1. Background

As part of the Obama Administration's efforts to make our healthcare system more transparent, affordable, and accountable, the Centers for Medicare & Medicaid Services (CMS) has prepared a public data set, the Provider Utilization and Payment Data Inpatient Public Use File (herein referred to as "Inpatient PUF"), with information on services and procedures provided to Medicare beneficiaries by hospital facilities. The Inpatient PUF contains hospital-specific charges for the more than 3,000 U.S. hospitals that receive Medicare Inpatient Prospective Payment System (IPPS) payments paid under Medicare based on a rate per discharge using the Medicare Severity Diagnosis Related Group (MS-DRG). Beginning with FY2014 data, all MS-DRG discharges are now reported in the Inpatient PUF. Prior years of the Inpatient PUF (FY2011 through FY2013) are limited to the top 100 most frequently billed discharges. This PUF is based on information from CMS's Medicare Provider Analysis and Review (MEDPAR) inpatient data. The data in the Inpatient PUF contains 100% final-action (i.e., all claim adjustments have been resolved) IPPS discharges for the Medicare fee-for-service (FFS) population. The Inpatient PUF is available for fiscal years 2011 through 2014.

2. Key data sources

The primary data source for these data is CMS's MEDPAR Inpatient data based on fiscal year (October 1st through September 30th). The NCH MEDPAR data contain 100 percent of Medicare final action discharges for beneficiaries who are enrolled in the FFS program as well as some managed care discharges. The types of discharges in the MEDPAR Inpatient data include: IPPS short term, long term care, critical access hospital, religious non-medical, rehabilitation and psychiatric. Discharges, covered charges, total payments and MS-DRG information presented in the Inpatient PUF are restricted to IPPS short term hospitalizations for the FFS population.

Inpatient provider demographics are also incorporated in the Inpatient PUF and include name, complete address and hospital referral region (HRR). The Inpatient provider name and address are derived from CMS's Provider of Service (POS) data, a resource that provides characteristics associated with institutional facilities. HRRs are geographic units of analysis based on facility location zip codes that were developed by the Dartmouth Atlas of Health Care to delineate regional health care markets in the United States. For additional information on the POS data, please visit <http://www.cms.gov/Research-Statistics-Data-and-Systems/Files-for-Order/NonidentifiableDataFiles/ProviderofServicesFile.html>. For additional information on HRR, please visit <http://www.dartmouthatlas.org/data/region/>.

3. Population

The Inpatient PUF includes data on for FFS beneficiaries from inpatient providers that submitted Medicare Part A IPPS short term institutional claims during the fiscal year. To protect the privacy of Medicare beneficiaries, any aggregated records which are derived from 10 or fewer discharges are excluded from the Inpatient PUF.

4. Classification and Summarization

The spending and utilization data in the inpatient PUF are aggregated to the following levels:

- a) the provider identifier, and
- b) Medicare Severity Diagnosis Related Group (MS-DRG)

The provider identifier is the numeric CMS Certification Number (CCN) assigned to a Medicare certified facility. MS-DRGs are a classification system that groups similar clinical conditions (diagnoses) and the procedures furnished by the hospital during the stay. Each hospital discharge is assigned to an MS-DRG. There can be multiple records for a given provider identifier based on the number of distinct MS-DRG codes that were billed.

5. Data Contents

Detailed Data File

The following variables are included in the detailed inpatient PUF data file:

DRG Definition: The code and description identifying the MS-DRG. MS-DRGs are a classification system that groups similar clinical conditions (diagnoses) and the procedures furnished by the hospital during the stay.

Provider ID: The CMS Certification Number (CCN) assigned to the Medicare certified hospital facility.

Provider Name: The name of the provider.

Provider Street Address: The provider's street address.

Provider City: The city where the provider is located.

Provider State: The state where the provider is located.

Provider Zip Code: The provider's zip code.

Provider HRR: The Hospital Referral Region (HRR) where the provider is located.

Total Discharges: The number of discharges billed by the provider for inpatient hospital services.

Average Covered Charges: The provider's average charge for services covered by Medicare for all discharges in the MS-DRG. These will vary from hospital to hospital because of differences in hospital charge structures.

Average Total Payments: The average total payments to all providers for the MS-DRG including the MS-DRG amount, teaching, disproportionate share, capital, and outlier payments for all cases. Also included

In average total payments are co-payment and deductible amounts that the patient is responsible for and any additional payments by third parties for coordination of benefits.

Average Medicare Payments: The average amount that Medicare pays to the provider for Medicare's share of the MS-DRG. Average Medicare payment amounts include the MS-DRG amount, teaching, disproportionate share, capital, and outlier payments for all cases. Medicare payments DO NOT include beneficiary co-payments and deductible amounts nor any additional payments from third parties for coordination of benefits. Note: In general, Medicare FFS claims with dates-of-service or dates-of-discharge on or after April 1, 2013, incurred a 2 percent reduction in Medicare payment. This is in response to mandatory across-the-board reductions in Federal spending, also known as sequestration. For additional information, visit <http://www.cms.gov/Outreach-and-Education/Outreach/FFSProvPartProg/Downloads/2013-03-08-standalone.pdf>

Summary Tables

Summary tables have been created to supplement the information reported in the Inpatient PUF.

"National and State Summaries of Inpatient Charge Data" contains information on discharges, payments (total amount and Medicare payment), and submitted charges organized by MS-DRG in the national table and organized by MS-DRG and provider state in the state table. The aggregated reports are not restricted to the redacted data reported in the Inpatient PUF but are aggregated based on all Medicare IPPS discharges.

More detailed information on the "National and State Summaries of Inpatient Charge Data" are provided in the Methodology and Documentation tabs of the workbook.

6. Data Limitations:

Although the Inpatient PUF has a wealth of payment and utilization information about many Medicare Part A services, the dataset also has some limitations that are worth noting.

The data in the Inpatient PUF may not be representative of a hospital's entire population served. The data in the file only has information for Medicare beneficiaries with Part A fee-for-service coverage, but hospitals typically treat many other patients who do not have that form of coverage. The Inpatient PUF does not have any information on patients who are not covered by Medicare, such as those with coverage from other federal programs (like the Federal Employees Health Benefits Program or Tricare), those with private health insurance (such as an individual policy or employer-sponsored coverage), or those who are uninsured. Even within Medicare, the Inpatient PUF does not include information for patients who are enrolled in any form of Medicare Advantage plan. Importantly, the data for FY 2011 through FY 2013 are limited to only the top 100 MS-DRGs and thus do not necessarily include all Medicare discharges from a given hospital.

The file only contains cost and utilization information, and for the reasons described in the preceding paragraph, the volume of procedures presented may not be fully inclusive of all procedures performed by the hospital.

The state of Maryland has a unique waiver that exempts it from Medicare's prospective payment systems for inpatient care. Maryland instead uses an all-payer rate setting commission to determine its payment rates. Medicare claims for hospitals in other states break out additional payments for indirect medical education (IME) costs and disproportionate share hospital (DSH) adjustments.

7. Updates:

June 2016 Updates:

We have updated the Inpatient PUF and the supplemental summary tables ("National and State Summaries of Inpatient Charge Data") for FY2014 to include all MS-DRG discharges from IPPS hospitals, which in prior years (FY2011 through FY2013) are limited to only the top 100 MS-DRG discharges.

Previous year's data (FY2011 through FY2013) have not been re-published to include all MS-DRG discharges.

Inpatient Prospective Payment System (IPPS) Provider Summary for All Diagnosis-Relat...
 The data provided here include hospital-specific charges for the more than 3,000 U.S. hospitals that receive

Visits	666
Downloads	107
Comments	0
Contributors	0

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Category	Public Use Files
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Tags	medicare, cms, health care providers, inpatient, ipps, hospital referral region (hrr), state, diagnosis-related groups (drg), 2014
Row Label	drg
Row Count	202666

Links

Permalink	https://data.cms.gov/Public-Use-Files/Inpatient-Prospective-Payment-System-IPPS-Provider/9zml-76w9
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Attachments

[Medicare Hospital Inpatient PUF Methodology 2016-08-14.pdf](#)

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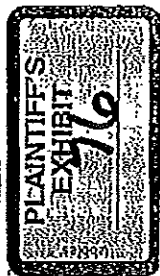
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Previous year's data (FY2011 through FY2013) have not been re-published to include all MS-DRG discharges.

023 - SPINAL PROCEDURES W/ CO	430006 MUSCULOSKELETAL CENTER	100 ACHLEY AVE	CHARLESTON	SC	29425	SC - Charleston	11	11044.4	51213.6	80274.27
023 - SPINAL PROCEDURES W/ CO	430009 MEMORIAL HERMAN TUDAS MEDICAL CENTER	6411 FAUNIN	HOUSTON	TX	77020	TX - Houston	12	28812.9	78262.2	26547.42
023 - SPINAL PROCEDURES W/ CO	500004 HARBORVIEW MEDICAL CENTER	CALLER PARK AVE	CHARLOTTEVILLE	VA	22905	VA - Charlottesville	13	16460.2	51407.2	44962.09
023 - SPINAL PROCEDURES W/ CO	500005 UNIVERSITY OF ALABAMA HOSPITAL	532 2TH AVENUE	SEATTLE	WA	98104	WA - Seattle	14	11266.9	56467.0	53503.05
023 - SPINAL PROCEDURES W/ CO	500006 HUNTSVILLE HOSPITAL	610 SOUTH 20TH STREET	BIRMINGHAM	AL	35203	AL - Birmingham	15	90543.1	24602.35	17891.45
023 - SPINAL PROCEDURES W/ CO	500007 ST JOSEPH'S HOSPITAL AND MEDICAL CENTER	101 ELMLEY RD	HUNTSVILLE	AL	35891	AL - Huntsville	16	10424.2	27402.35	10771.92
023 - SPINAL PROCEDURES W/ CO	500008 UCST MEDICAL CENTER	350 WEST THOMAS ROAD	PHOENIX	CA	85013	CA - Phoenix	17	14577.6	59511.41	23011.32
023 - SPINAL PROCEDURES W/ CO	500009 UNIVERSITY OF CALIFORNIA DAVIS MEDICAL CENTER	2815 STOCKTON BOULEVARD	SACRAMENTO	CA	94203	CA - Sacramento	18	19153.3	62425.06	34643.37
023 - SPINAL PROCEDURES W/ CO	500010 CEDARS-SINAI MEDICAL CENTER	2700 DEVERLY BLVD	LOS ANGELES	CA	90048	CA - Los Angeles	19	22723.2	37310.16	34643.37
023 - SPINAL PROCEDURES W/ CO	500011 VALLEYVIEW HOSPITAL	23 YORK ST	NEW HAVEN	CT	06511	CT - New Haven	20	22462.6	26043.39	22816.47
023 - SPINAL PROCEDURES W/ CO	500012 CHRISTIANA CARE HEALTH SERVICES, INC.	3800 RESERVOR RD	WILMINGTON	DE	19804	DE - Wilmington	21	30702.0	34490.08	27344.06
023 - SPINAL PROCEDURES W/ CO	500013 FLORIDA HOSPITAL	601 E ROLLING ST	ORLANDO	FL	32803	FL - Orlando	22	4821.6	29597.71	23433.36
023 - SPINAL PROCEDURES W/ CO	500014 JACKSON MEMORIAL HOSPITAL	1011 NW 12TH AVE	MIAMI	FL	33136	FL - Miami	23	10043.4	21541.79	16681.09
023 - SPINAL PROCEDURES W/ CO	500015 TULSA GENERAL HOSPITAL	1700A GENERAL CIR	TAMPA	FL	33604	FL - Tampa	24	7384.3	34592.3	10372.72
023 - SPINAL PROCEDURES W/ CO	500016 RUSH UNIVERSITY HOSPITAL	1625 WEST CONGRESS PARKWAY	CHICAGO	IL	60612	IL - Chicago	25	82745.3	37547.09	10372.72
023 - SPINAL PROCEDURES W/ CO	500017 LOTUS UNIVERSITY MEDICAL CENTER	2100 S 1ST AVENUE	INDIANAPOLIS	IN	46203	IN - Indianapolis	26	65402.5	24611.37	20701.46
023 - SPINAL PROCEDURES W/ CO	500018 NORTHWESTERN MEMORIAL HOSPITAL	301 E HURON ST	CHICAGO	IL	60611	IL - Chicago	27	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500019 ST VINCENT HOSPITAL & HEALTH SERVICES	200 NORTH WOLFE STREET	INDIANAPOLIS	IN	46204	IN - Indianapolis	28	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500020 UNIVERSITY OF IOWA HOSPITAL & CLINICS	200 HAWKINS DRIVE	IOWA CITY	IA	52242	IA - Iowa City	29	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500021 JOHNS HOPKINS HOSPITAL	725 FRANKLIN STREET	BALTIMORE	MD	21205	MD - Baltimore	30	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500022 MASSACHUSETTS GENERAL HOSPITAL	240 WEST ASTOR AVENUE	BOSTON	MA	02115	MA - Boston	31	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500023 BRIGHAM AND WOMEN'S HOSPITAL	75 FRANKLIN STREET	BOSTON	MA	02115	MA - Boston	32	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500024 PROVIDENCE HOSPITAL AND MEDICAL CENTERS	1000 VINE STREET	SOUTHFIELD	MI	48075	MI - Royal Oak	33	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500025 SPECTRUM HEALTH - BUTTERNORTH CAMPUS	1000 MICHIGAN ST NE	GRAND RAPIDS	MI	49503	MI - Grand Rapids	34	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500026 UNIVERSITY OF MICHIGAN HOSPITAL	1000 MICHIGAN ST NE	ANN ARBOR	MI	48106	MI - Ann Arbor	35	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500027 MAYO CLINIC HOSPITAL	1000 MICHIGAN ST NE	ROCHESTER	NY	14609	NY - Rochester	36	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500028 ST DOMINIC HOSPITAL	1000 MICHIGAN ST NE	JACKSON	MS	39215	MS - Jackson	37	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500029 BARNES JEWISH HOSPITAL	200 LANDLORD DR	ST LOUIS	MO	63110	MO - St. Louis	38	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500030 ALABAMA MEDICAL CENTER HOSPITAL	ONE PARKEDGEMONT HOSPITAL BLVD	ALBANY	NY	12208	NY - Albany	39	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500031 MOUNT SINAI HOSPITAL	ONE GUSNETT LUCY PLACE	NEW YORK	NY	10029	NY - Manhattan	40	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500032 NEW YORK-PRESBYTERIAN HOSPITAL	525 EAST 68TH STREET	NEW YORK	NY	10021	NY - Manhattan	41	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500033 NORTH CHASE UNIVERSITY HOSPITAL	300 CONSUMERS DRIVE	MANHATTAN	NY	10016	NY - Manhattan	42	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500034 NYU HOSPITALS CENTER	550 FIRST AVENUE	NEW YORK	NY	10016	NY - Manhattan	43	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500035 DUKE UNIVERSITY HOSPITAL	PO BOX 2708 DUMC STENEN RD	DURHAM	NC	27710	NC - Durham	44	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500036 CAROLINA MEDICAL CENTER/REVA HEALTH	1100 RUTHERFORD BLVD	CHARLOTTE	NC	27710	NC - Durham	45	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500037 OHIO STATE UNIVERSITY HOSPITALS	410 WEST 10TH AVENUE	COLUMBUS	OH	43210	OH - Columbus	46	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500038 UNIVERSITY HOSPITALS CASE MEDICAL CENTER	1100 RUTHERFORD BLVD	CLEVELAND	OH	44106	OH - Cleveland	47	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500039 UPMC/PICTETTERMAN SHADYIDE	200 E 19TH STREET	CLEVELAND	OH	44106	OH - Cleveland	48	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500040 THOMAS JEFFERSON UNIVERSITY HOSPITAL	111 SOUTH 15TH STREET	PITTSBURGH	PA	15213	PA - Pittsburgh	49	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500041 MERCY MEDICAL CENTER	215 SOUTH 15TH STREET	PHILADELPHIA	PA	19107	PA - Philadelphia	50	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500042 MEMORIAL HERMAN TEXAS MEDICAL CENTER	200 ARKLETT AVE	HOBBSLEY	SC	29033	SC - Charleston	51	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500043 METHODIST HOSPITAL THE	6411 FAUNIN	HOUSTON	TX	77030	TX - Houston	52	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500044 UNIVERSITY HEALTH CARE/CLINICAL SERVICES	5151 HARRY HINES BLVD	HOUSTON	TX	77030	TX - Houston	53	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500045 UNIVERSITY HEALTH CARE/CLINICAL SERVICES	50 NORTH MEDICAL DRIVE	SALT LAKE CITY	UT	84143	UT - Salt Lake City	54	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500046 HARBORVIEW MEDICAL CENTER	500 27TH AVENUE	SEATTLE	WA	98104	WA - Seattle	55	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500047 UNIVERSITY OF WY HOSPITALS & CLINICS AUTHORITY	225 5TH AVENUE	SEATTLE	WA	98104	WA - Seattle	56	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500048 METHODIST STONE OAK HOSPITAL	1330 E SENTERA BLVD	SAN ANTONIO	TX	78203	TX - San Antonio	57	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500049 ST JOSEPH'S HOSPITAL AND MEDICAL CENTER	350 WEST THOMAS ROAD	PHOENIX	AZ	85013	AZ - Phoenix	58	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500050 CEDARS-SINAI MEDICAL CENTER	707 WESTWOOD BLVD	LOS ANGELES	CA	90048	CA - Los Angeles	59	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500051 VALLEYVIEW HAVEN HOSPITAL	200 YORK ST	NEW HAVEN	CT	06511	CT - New Haven	60	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500052 FLORIDA HOSPITAL	601 E ROLLING ST	ORLANDO	FL	32803	FL - Orlando	61	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500053 MEMORIAL MEDICAL CENTER	700 N FIRST ST	SPRINGFIELD	IL	62761	IL - Springfield	62	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500054 NORTHWESTERN MEMORIAL HOSPITAL	320 E HURON ST	CHICAGO	IL	60611	IL - Chicago	63	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500055 INDIANAPOLIS UNIVERSITY HEALTH	3201 N STATE BLVD	INDIANAPOLIS	IN	46202	IN - Indianapolis	64	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500056 ST LOUIS HOSPITAL	3701 E CREASY LN	LAVERGNE	MO	63042	MO - St. Louis	65	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500057 JOHNS HOPKINS HOSPITAL, THE	600 NORTH WOLFE STREET	BALTIMORE	MD	21205	MD - Baltimore	66	155997.5	35923.3	20701.46
023 - SPINAL PROCEDURES W/ CO	500058 SINAI HOSPITAL OF BALTIMORE	2400 WEST BELVIDERE AVENUE	BALTIMORE	MD	21205	MD - Baltimore	67	155997.5	35923.3	20701.46



Inpatient Prospective Payment System (IPPS) Provider Summary for Al...

The data provided here include hospital-specific charges for the more than 3,000 U.S.

[Back to Dataset](#)

Description

The data provided here include hospital-specific charges for the more than 3,000 U.S. hospitals that receive Medicare Inpatient Prospective Payment System (IPPS) payments for discharges, paid under Medicare based on a rate per discharge using the Medicare Severity Diagnosis Related Group (MS-DRG) for Fiscal Year (FY) 2014. These MS-DRGs represent more than 7 million discharges or 75 percent of total Medicare IPPS discharges.



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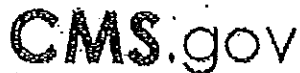
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[Home](#) > [Research, Statistics, Data and Systems](#) > [Medicare Provider Utilization and Payment Data](#) > [Inpatient Charge Data FY 2014](#)

Inpatient Charge Data FY 2014

The data provided here include hospital-specific charges for the more than 3,000 U.S. hospitals that receive Medicare Inpatient Prospective Payment System (IPPS) payments for discharges, paid under Medicare based on a rate per discharge using the Medicare Severity Diagnosis Related Group (MS-DRG) for Fiscal Year (FY) 2014. These MS-DRGs represent more than 7 million discharges or 75 percent of total Medicare IPPS discharges.

Hospitals determine what they will charge for items and services provided to patients and these charges are the amount the hospital bills for an item or service. The Total Payment amount includes the MS-DRG amount, bill total per diem, beneficiary primary payer claim payment amount, beneficiary Part A coinsurance amount, beneficiary deductible amount, beneficiary blood deductible amount and DRG outlier amount.

For these MS-DRGs, average charges, average total payments, and average Medicare payments are calculated at the individual hospital level. Users will be able to make comparisons between the amount charged by individual hospitals within local markets, and nationwide, for services that might be furnished in connection with a particular inpatient stay.

08/23/16 UPDATE:

The Inpatient Charge Data and the MS-DRG Summary Tables have been updated to include all MS-DRG discharges from IPPS hospitals, which in prior years (FY2011 through FY2013) are limited to only the top 100 MS-DRG discharges.

Previous year's data (FY2011 through FY2013) have not been re-published to include all MS-DRG discharges.

Detailed Data:

Data are being made available in Microsoft Excel (.xlsx) format and comma separated values (.csv) format.

[Inpatient Charge Data, FY2014, Microsoft Excel version](#)

[Inpatient Charge Data, FY2014, Comma Separated Values \(CSV\) version](#)

MS-DRG Summary Tables:

[National and State Summaries of Inpatient Charge Data, FY2014, Microsoft Excel version](#)

[National and State Summaries of Inpatient Charge Data, FY2014, Comma Separated Values \(CSV\) version](#)

For answers to any questions about the data, please see our [Frequently Asked Questions](#) page.

Inquiries regarding this data can be sent to MedicareProviderData@cms.hhs.gov.

To receive email notifications, please sign up for the Medicare Provider Data GoDelivery subscription [here](#).

Downloads

[Medicare Inpatient PUF Methodology \(PDF, 185KB\)](#)

[Medicare Fee-For-Service Enrollment by State and HRR QY2014 \(ZIP, 33KB\)](#)

Related Links

[2014 Inpatient Data on data.cms.gov](#)

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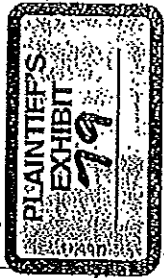


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SUPPLEMENTARY TABLE 1
REASONABLE CHARGES DATA SOURCES — v3.18

Change Type	Paragraph	Subject	Data Source	Edition
INPT	(b)(3)	GAAFs	CMS Medicare Provider Analysis and Review (MedPAR) Record	FY 2014
INPT	(b)(3)	GAAFs	MarketScan Claims Database	CY 2013
INPT	(b)(3)	GAAFs	CMS Provider of Services Listing	2Q 2014
INPT	(b)(3)	GAAFs	VA nationwide admits by DRG code	FY 2014
INPT	(b)(3)	GAAFs	VA Reasonable Charges - Table N	CY 2015
SNF	(c)(3)	GAAFs	CMS Medicare Provider Analysis and Review (MedPAR) Record - SNF File	FY 2013
SNF	(c)(3)	GAAFs	CMS Provider of Services Listing	2Q 2014
SNF	(c)(3)	GAAFs	VA Reasonable Charges - Table O	CY 2015
PH	(d)(2)	per diem charge	Medicare SAF 5% Sample, outpatient facility component	CY 2013
PH	(d)(2)(b)	trending forward	CPI-U, outpatient hospital services component, seasonally adjusted	July 2015
Opt	(e)(3)(i)	80th percentile charges, codes with APCs	Medicare APC payment amount - OPFS	CY 2016
Opt	(e)(3)(i)	80th percentile charges, codes with APCs	Medicare SAF 5% Sample, outpatient facility component	CY 2013
Opt	(e)(3)(ii)	80th percentile charges, codes with no APC	FAIR Health Outpatient Facility database	April 2015
Opt	(e)(3)(ii)	80th percentile charges, codes with no APC	Medicare SAF 5% Sample, outpatient facility component	CY 2013
Opt	(e)(3)(ii)	80th percentile charges, codes with no APC	MarketScan Claims Database	CY 2013
Opt	(e)(3)(ii)	80th percentile charges, codes with no APC	VA Reasonable Charges - Table F	CY 2015
Opt	(e)(3)(iii)	trending forward	CPI-U, outpatient hospital services component, seasonally adjusted	July 2015
Opt	(e)(4)	GAAFs	FAIR Health Outpatient Facility database	April 2015
Opt	(e)(4)	GAAFs	Milliman, Inc., Health Cost Guidelines, Population Assumptions	CY 2015
Opt	(e)(4)	GAAFs	VA Reasonable Charges - Table P	CY 2015
Phys	(f)(2)(i)(A)	RVU GAAFs, codes with Medicare RVUs, work expense	Medicare Geographic Practice Cost Index, work expense	CY 2015
Phys	(f)(2)(i)(A)	RVUs, codes with Medicare RVUs, work expense	Medicare Physician Fee Schedule RVUs, work expense	October 2015
Phys	(f)(2)(i)(B)	RVU GAAFs, codes with Medicare RVUs, practice expense	Medicare Geographic Practice Cost Index, practice expense	CY 2015
Phys	(f)(2)(i)(B)	RVUs, codes with Medicare RVUs, practice expense	Medicare Physician Fee Schedule RVUs, practice expense	October 2015
Phys	(f)(2)(i)(B)	RVUs, codes with no Medicare RVUs	Essential RBRVS	January 2015
Phys	(f)(2)(i)(B)	RVUs, codes with no Medicare RVUs	FAIR Health Medical Billing database	May 2015
Phys	(f)(2)(i)(B)	RVUs, codes with no Medicare RVUs	FAIR Health HCPCS database	June 2015
Phys	(f)(2)(i)(B)	RVUs, codes with no Medicare RVUs	Medicare SAF 5% Sample, Part B component	CY 2013
Phys	(f)(2)(i)(B)	RVUs, codes with no Medicare RVUs	VA Reasonable Charges - Table G	CY 2015
Phys	(f)(2)(i)(B)	RVUs, unlisted procedures	VA nationwide distribution of procedures and services	FY 2014
Phys	(f)(2)(iv)	RVU GAAFs, codes with no Medicare RVUs	Medicare Geographic Practice Cost Index, practice expense	CY 2015
Phys	(f)(2)(iv)	RVU GAAFs, codes with no Medicare RVUs	FAIR Health Medical Billing database	CY 2015
Phys	(f)(3)	conversion factors, 80th percentile, geographically adjusted	FAIR Health HCPCS database	May 2015
Phys	(f)(3)	conversion factors, 80th percentile, geographically adjusted	FAIR Health HCPCS database	June 2015
Phys	(f)(3)(i)	conversion factor, nationwide	Milliman, Inc., Health Cost Guidelines, Population Assumptions	CY 2015
Phys	(f)(3)(i)	trending forward	CPI-U, physicians' services component, seasonally adjusted	July 2015
Phys	(f)(3)(ii)	conversion factor GAAFs	FAIR Health Medical Billing database	May 2015
Phys	(f)(3)(ii)	conversion factor GAAFs	FAIR Health HCPCS database	CY 2015
Phys	(f)(3)(iii)	conversion factor GAAFs	Milliman, Inc., Health Cost Guidelines, Population Assumptions	May 2015
Phys	(f)(3)(iii)	conversion factor GAAFs	VA Reasonable Charges - Table L	May 2015
Phys	(f)(3)(iii)	GAAFs	Medicare SAF 5% Sample, Part B component	May 2015
Phys	(f)(4)	modifiers: charge adjustment factors		



SUPPLEMENTARY TABLE 1
REASONABLE CHARGES DATA SOURCES — v3.18

Charge Type	Paragraph	Subject	Data Source	Edison
Anes	(g)(2)	RVLs	CMS anesthesia base units	CY 2015
Anes	(g)(2)	RVLs for unlisted procedures	VA nationwide distribution of procedures and services	FY 2014
Anes	(g)(3)(i)	conversion factor, nationwide	CMS anesthesia base units	CY 2015
Anes	(g)(3)(i)	conversion factor, nationwide	FAIR Health Anesthesia database	May 2015
Anes	(g)(3)(i)	conversion factor, nationwide	Medicare SAF 5% Sample, Part B component	CY 2013
Anes	(g)(3)(i)	conversion factor, nationwide	Milliman, Inc., Health Cost Guidelines, Population Assumptions	CY 2015
Anes	(g)(3)(i)	conversion factor, nationwide	CPHJ, physicians' services component, seasonally adjusted	July 2015
Anes	(g)(3)(ii)	conversion factor, nationwide	FAIR Health Anesthesia database	May 2015
Anes	(g)(3)(ii)	conversion factor, nationwide	Milliman, Inc., Health Cost Guidelines, Population Assumptions	CY 2015
Dent	(h)(2)	charges, 80th percentile, nationwide	FAIR Health Dental database	July 2015
Dent	(h)(2)	charges, 80th percentile, nationwide	National Dental Advisory Service nationwide pricing index	CY 2015
Dent	(h)(2)	charges, 80th percentile, nationwide	Milliman, Inc., Health Cost Guidelines, Population Assumptions	CY 2015
Dent	(h)(2)	charges, 80th percentile, nationwide	VA Reasonable Charges - Table J	CY 2015
Dent	(h)(2)(i)	charges, 80th percentile, nationwide	FAIR Health Dental database	July 2015
Dent	(h)(2)(i)	charges, 80th percentile, nationwide	National Dental Advisory Service nationwide pricing index	CY 2015
Dent	(h)(2)(i)	charges, 80th percentile, nationwide	VA nationwide distribution of procedures, services, items, and supplies	FY 2014
Dent	(h)(2)(i)	charges, 80th percentile, nationwide	CPHJ, dental services component, seasonally adjusted	July 2015
Dent	(h)(2)(ii)	charges, 80th percentile, nationwide	FAIR Health Dental database	July 2015
Dent	(h)(2)(ii)	charges, 80th percentile, nationwide	Milliman, Inc., Dental Health Cost Guidelines	CY 2015
Dent	(h)(2)(ii)	charges, 80th percentile, nationwide	Milliman, Inc., Health Cost Guidelines, Population Assumptions	CY 2015
Dent	(h)(2)(ii)	charges, 80th percentile, nationwide	VA Reasonable Charges - Table R	CY 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	FAIR Health Medical Billed database	May 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	FAIR Health HCPOS database	June 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	Medicare Clinical Diagnostic Laboratory Fee Schedule	CY 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	Medicare conversion factor	CY 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	Medicare Physician Fee Schedule payment levels	October 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	Essential RBRVS	January 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	FAIR Health Medical Billed database	May 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	FAIR Health HCPOS database	June 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	Medicare SAF 5% Sample, Part B component	CY 2013
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	VA Reasonable Charges - Table J	CY 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	VA nationwide distribution of procedures and services	FY 2014
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	Medicare Geographic Practice Cost Index, practice expense	CY 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	Medicare Geographic Practice Cost Index, work expense	CY 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	FAIR Health Medical Billed database	May 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	Milliman, Inc., Health Cost Guidelines, Population Assumptions	CY 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	CPHJ, physicians' services component, seasonally adjusted	July 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	FAIR Health Medical Billed database	May 2015
Lab	(i)(2)(i)	RVLs, codes with Medicare-based RVLs	Milliman, Inc., Health Cost Guidelines, Population Assumptions	CY 2015
Obs	(j)(2)(i)	charges, 80th percentile, nationwide	Medicare SAF 5% Sample, outpatient facility component	CY 2013
Obs	(j)(2)(i)	charges, 80th percentile, nationwide	CPHJ, outpatient hospital services component, seasonally adjusted	June 2015

SUPPLEMENTARY TABLE 1
REASONABLE CHARGES DATA SOURCES -- v3.18

Charge Type	Paragraph	Subject	Data Source	Edition
Amb	(b)(2)(i)	base charge, 80th percentile, nationwide	Medicare SAF 5% Sample, outpatient facility component	CY 2013
Amb	(b)(2)(ii)	mileage charge, 80th percentile, nationwide	Medicare SAF 5% Sample, outpatient facility component	CY 2013
Amb	(b)(2)(iii)	trending forward	CPI-U, outpatient hospital services component, seasonally adjusted	July 2015
DME	(b)(2)(i)	relative values	Essential RBRVS, practice expense RVUs	January 2015
DME	(b)(2)(i)	relative values	Medicare DME Fee Schedule	October 2015
DME	(b)(2)(i)	relative values	Medicare Parenteral and Enteral Nutrition Fee Schedule	January 2015
DME	(b)(2)(ii)	charge amounts	FAIR Health HCPCS database	June 2015
DME	(b)(2)(ii)	charge amounts	Medicare SAF 5% Sample, DME component	CY 2013
DME	(b)(2)(ii)	charge amounts	Medicare SAF 5% Sample, Part B component	June 2015
DME	(b)(2)(iii)	charge ratios, 80th percentile to median	FAIR Health HCPCS database	CY 2013
DME	(b)(2)(iii)	charge ratios, 80th percentile to median	Medicare SAF 5% Sample, DME component	June 2015
DME	(b)(2)(iii)	charge ratios, 80th percentile to median	Medicare SAF 5% Sample, Part B component	CY 2013
DME	(b)(2)(iv)	trending forward	Medicare SAF 5% Sample, Part B component	July 2015
DME	(b)(3)	charges for codes with no RVUs	CPI-U, medical care commodities component, seasonally adjusted	June 2015
DME	(b)(3)	charges for codes with no RVUs	FAIR Health HCPCS database	CY 2013
DME	(b)(3)	charges for codes with no RVUs	Medicare SAF 5% Sample, DME component	CY 2013
DME	(b)(3)	charges for codes with no RVUs	Medicare SAF 5% Sample, Part B component	CY 2013
DME	(b)(3)	charges for codes with no RVUs	VA Reasonable Charges - Table X	CY 2015
DME	(b)(3)(i)	trending forward	VA nationwide distribution of items and charges	FY 2014
DME	(b)(4)	charges for unlisted procedures	CPI-U, medical care commodities component, seasonally adjusted	July 2015
DME	(b)(5)(i)	charges, weighted average, area-specific	VA nationwide distribution of procedures, services, items, and supplies	FY 2014
DME	(b)(5)(i)	charges, weighted average, area-specific	FAIR Health HCPCS database	June 2015
DME	(b)(5)(ii)	charges, weighted average, area-specific	Medicare SAF 5% Sample, DME component	CY 2013
DME	(b)(5)(ii)	charges, weighted average, area-specific	Medicare SAF 5% Sample, Part B component	CY 2013
DME	(b)(5)(iii)	charges, weighted average, nationwide	Miliman, Inc., Health Cost Guidelines, Population Assumptions	CY 2015
DME	(b)(5)(iv)	GAAFs	FAIR Health HCPCS database	June 2015
DME	(b)(5)(v)	GAAFs	Medicare SAF 5% Sample, DME component	CY 2013
DME	(b)(5)(vi)	GAAFs	Medicare SAF 5% Sample, Part B component	CY 2013
DME	(b)(5)(vii)	GAAFs	Miliman, Inc., Health Cost Guidelines, Population Assumptions	CY 2015
DME	(b)(5)(viii)	GAAFs	VA Reasonable Charges - Table Q	CY 2015
DME	(b)(11)	charges for codes without data	Medicare DME Fee Schedule	October 2015

SUPPLEMENTARY TABLE 1
REASONABLE CHARGES DATA SOURCES --- v3.18

Parentgraph	Subject	Data Source	Edition
Artes Artes	RVUs conversion factor, nationwide	CMS anesthesia base units	CY 2015
INPT SNF	GAAPs GAAPs	CMS anesthesia base units	CY 2015
INPT SNF	GAAPs GAAPs	CMS Medicare Provider Analysis and Review (MedPAR) Record	FY 2014
		CMS Medicare Provider Analysis and Review (MedPAR) Record - SNF File	FY 2013
Dent DME	trending forward trending forward	CMS Provider of Services Listing	2Q 2014
PH	trending forward	CMS Provider of Services Listing	2Q 2014
Opt	trending forward	CPI-U, dental services component, seasonally adjusted	July 2015
Obs	trending forward	CPI-U, medical care commodities component, seasonally adjusted	July 2015
Amb	trending forward	CPI-U, medical care commodities component, seasonally adjusted	July 2015
Phys	trending forward	CPI-U, outpatient hospital services component, seasonally adjusted	July 2015
Artes	trending forward	CPI-U, outpatient hospital services component, seasonally adjusted	July 2015
Lab	trending forward	CPI-U, physicians' services component, seasonally adjusted	July 2015
Phys	RVUs, codes with no Medicare RVUs	CPI-U, physicians' services component, seasonally adjusted	July 2015
Lab	RVUs, codes with no Medicare-based RVUs	CPI-U, physicians' services component, seasonally adjusted	July 2015
DME	relative values	Essential RBRVS	January 2015
		Essential RBRVS	January 2015
		Essential RBRVS, practice expense RVUs	January 2015
Artes	conversion factor, nationwide	FAIR Health Anesthesia database	May 2015
Artes	conversion factor GAAPs	FAIR Health Anesthesia database	May 2015
Dent	charges, 80th percentile, nationwide	FAIR Health Dental database	May 2015
Dent	charges, 80th percentile, nationwide, for unlisted procedures	FAIR Health Dental database	July 2015
Dent	GAAPs	FAIR Health Dental database	July 2015
Phys	RVUs, codes with no Medicare RVUs	FAIR Health HCPCS database	June 2015
Phys	conversion factors, 80th percentile, geographically adjusted	FAIR Health HCPCS database	June 2015
Phys	conversion factor GAAPs	FAIR Health HCPCS database	June 2015
Lab	RVUs, codes with Medicare-based RVUs	FAIR Health HCPCS database	June 2015
Lab	charge amounts	FAIR Health HCPCS database	June 2015
DME	charge ratios, 80th percentile to median	FAIR Health HCPCS database	June 2015
DME	charges for codes with no RVUs	FAIR Health HCPCS database	June 2015
DME	charges, weighted average, area-specific	FAIR Health HCPCS database	June 2015
DME	GAAPs	FAIR Health HCPCS database	June 2015
Phys	RVUs, codes with no Medicare RVUs	FAIR Health HCPCS database	June 2015
Phys	conversion factors, 80th percentile, geographically adjusted	FAIR Health Medical Billing database	May 2015
Phys	conversion factor GAAPs	FAIR Health Medical Billing database	May 2015
Lab	RVUs, codes with Medicare-based RVUs	FAIR Health Medical Billing database	May 2015
Lab	RVUs, codes with no Medicare-based RVUs	FAIR Health Medical Billing database	May 2015
Lab	conversion factors, 80th percentile, geographically adjusted	FAIR Health Medical Billing database	May 2015
Lab	conversion factor GAAPs	FAIR Health Medical Billing database	May 2015

SUPPLEMENTARY TABLE 1
REASONABLE CHARGES DATA SOURCES — v3.18

Paraphrase	Subject	Data Source	Edition
Opt Opt	80th percentile charges, codes with no APC GAAFs	FAIR Health Outpatient Facility database	April 2015
INPT	GAAFs	FAIR Health Outpatient Facility database	April 2015
Opt	80th percentile charges, codes with no APC	MarketScan Claims Database	CY 2013
Opt	80th percentile charges, codes with APCs	MarketScan Claims Database	CY 2013
Lab	RVLs, codes with Medicare-based RVUs	Medicare APC payment amount - OPFS	CY 2016
Lab	RVLs, codes with Medicare-based RVUs	Medicare Clinical Diagnostic Laboratory Fee Schedule	CY 2015
DME	relative values	Medicare conversion factor	CY 2015
DME	charges for codes without data	Medicare DME Fee Schedule	October 2015
Phys	RVL GAAFs, codes with Medicare RVUs, practice expense	Medicare DME Fee Schedule	October 2015
Phys	RVL GAAFs, codes with no Medicare RVUs	Medicare Geographic Practice Cost Index, practice expense	CY 2015
Lab	RVL GAAFs, codes with no Medicare RVUs	Medicare Geographic Practice Cost Index, practice expense	CY 2015
Phys	RVL GAAFs, codes with Medicare RVUs, work expense	Medicare Geographic Practice Cost Index, practice expense	CY 2015
Phys	RVL GAAFs, codes with no Medicare RVUs	Medicare Geographic Practice Cost Index, work expense	CY 2015
Lab	RVL GAAFs, codes with no Medicare-based RVUs	Medicare Geographic Practice Cost Index, work expense	CY 2015
DME	relative values	Medicare Geographic Practice Cost Index, work expense	CY 2015
Lab	RVLs, codes with Medicare-based RVUs	Medicare Parenteral and Enteral Nutrition Fee Schedule	January 2015
Phys	RVLs, codes with Medicare RVUs, practice expense	Medicare Physician Fee Schedule payment levels	October 2015
Phys	RVLs, codes with Medicare RVUs, work expense	Medicare Physician Fee Schedule RVUs, practice expense	October 2015
DME	charge amounts	Medicare Physician Fee Schedule RVUs, work expense	October 2015
DME	charge ratios, 80th percentile to median	Medicare SAF 5% Sample, DME component	CY 2013
DME	charges for codes with no RVUs	Medicare SAF 5% Sample, DME component	CY 2013
DME	charges, weighted average, area-specific	Medicare SAF 5% Sample, DME component	CY 2013
DME	GAAFs	Medicare SAF 5% Sample, DME component	CY 2013
PH	per diem charge	Medicare SAF 5% Sample, DME component	CY 2013
Opt	80th percentile charges, codes with APCs	Medicare SAF 5% Sample, outpatient facility component	CY 2013
Opt	80th percentile charges, codes with no APC	Medicare SAF 5% Sample, outpatient facility component	CY 2013
Obs	charges, 80th percentile, nationwide	Medicare SAF 5% Sample, outpatient facility component	CY 2013
Amb	base charge, 80th percentile, nationwide	Medicare SAF 5% Sample, outpatient facility component	CY 2013
Amb	mileage charge, 80th percentile, nationwide	Medicare SAF 5% Sample, outpatient facility component	CY 2013
Phys	RVLs, codes with no Medicare RVUs	Medicare SAF 5% Sample, outpatient facility component	CY 2013
Phys	modifiers: charge adjustment factors	Medicare SAF 5% Sample, Part B component	CY 2013
Phys	conversion factor, nationwide	Medicare SAF 5% Sample, Part B component	CY 2013
Acas	RVLs, codes with no Medicare-based RVUs	Medicare SAF 5% Sample, Part B component	CY 2013
Lab	charge amounts	Medicare SAF 5% Sample, Part B component	CY 2013
DME	charge ratios, 80th percentile to median	Medicare SAF 5% Sample, Part B component	CY 2013
DME	charges for codes with no RVUs	Medicare SAF 5% Sample, Part B component	CY 2013
DME	charges, weighted average, area-specific	Medicare SAF 5% Sample, Part B component	CY 2013